



ESF 8 Health & Medical Area Command Bulletin

PREPARING FOR H1N1 FLU RESPONSE

August 28, 2009

Bulletin #6



Jeff Duchin, MD, FACP, FIDSA

The recent report released by the President's Council of Advisors on Science and Technology indicated that up to 50% of the U.S. population could become infected with novel H1N1 flu this fall and winter. Do you agree with these estimates?

A: While 10-40% of children and a smaller proportion of adults typically become sick from flu during regular flu season, most people have no immunity to this new H1N1 virus. For this reason it is likely that many more people will become infected than in a typical flu season. It is important to remember that among all infected people. most recover without complications. However, with a new pandemic influenza strain like H1N1, because more people than usual do get infected, there are also more serious cases including hospitalizations and deaths. I think it is reasonable to plan for 2-3 times the amount of illness we see in a typical flu season, with the majority of cases and serious illnesses among children and voungmiddle aged adults.

The Situation New

Question & Answer with Dr. Jeff Duchin

For an update on the current novel H1N1 flu situation this week, Dr. Jeff Duchin, MD, FACP, FIDSA, Chief of the Communicable Disease Epidemiology & Immunization program at Public Health – Seattle & King County, and an Associate Professor in Medicine, Division of Infectious Diseases, University of Washington provides his perspectives.

Q: How will Public Health monitor flu activity in King County this fall?

A: Public Health agencies nationwide are shifting from tracking individual cases to monitoring for the extent and severity of the outbreak in the community. This primarily means tracking hospitalized cases we will not be requesting reports on all cases of influenza. In addition. the WA State Public Health Laboratory will test specimens from healthcare workers and pregnant women who have a positive screening test for influenza A, even if they are not hospitalized. However, this testing should not be relied upon to make clinical management decision because it is not timely. In addition, other important surveillance methods include school-absenteeism reporting by King County schools, our lab-based sentinel provider surveillance system, and our syndromic surveillance for influenzalike illness at King County emergency departments and selected primary care practices.

How long do you think novel H1N1 flu will circulate in King County?

A: My best guess is that we will see influenza activity increase in late September and continue through October and November, possibly longer. I don't have a prediction regarding whether we will see a second wave of influenza A H1N1 after an initial fall/winter outbreak, but I hope that the supply of vaccine

will be adequate to allow us to immunize many persons this fall and minimize the impact of a second wave, should it occur. Another potential problem is a simultaneous or sequential wave of seasonal influenza, which is why we are recommending all persons get their seasonal influenza vaccination as soon as it is available in the community.

Q: What are the differences between risk groups for novel H1N1 flu versus seasonal flu?

A: The risk groups for influenza H1N1 and seasonal flu are similar. Both include young infants, pregnant women, and persons with underlying medical conditions such as asthma and other chronic lung disease, chronic heart disease (primarily congestive heart failure but not hypertension) metabolic disease (primarily diabetes), certain neurological diseases, and immune suppression. The main difference is that influenza A H1N1 causes relatively fewer severe cases among adults over 65 years of age and more severe cases among younger persons. For a complete list of high-risk medical conditions, see Public Health's influenza flu web page at

www.kingcounty.gov/health/h1n1

About this Bulletin:

Public Health -Seattle & King County activated the Health & Medical Area Command on July 7 to coordinate health. medical and mortuary planning for regional hazards including H1N1 influenza and the **Howard Hanson** Dam - Green River Valley flood risks. Each week we issue a bulletin on one of these topics to outline key situational updates, planning activities and information specific to health, medical and mortuary response.

planning tools

10 Action Steps for Medical Offices & Outpatient Facilities

Business Resiliency for Healthcare

H1N1 Flu Resources for Businesses and Employers New

H1N1 Flu
Resources for
Colleges and
Universities New

Facemask & Respirator Use

Stop Germs, Stay Healthy campaign

For tomorrow's emergency VOLUNTEER TODAY!

King County Public Health Reserve Corps needs medical and non-medical volunteers during public health emergencies and major disasters! Visit www.kingcounty.gov/health/phrc or email phrc@kingcounty.gov.

Question & Answer with Dr. Jeff **Duchin Continued**

Will the seasonal flu vaccine help prevent novel H1N1 influenza?

A: Seasonal flu vaccine is important to protect against seasonal strains of influenza that may also cause disease this fall, but will not protect against the new virus. This is why a separate vaccine is needed for the novel influenza H1N1.

Q: What steps are being taken to ensure the novel H1N1 vaccine will be safe?

A: The novel H1N1 vaccine is manufactured in the same way as seasonal flu vaccines, and the manufacturing process has the same regulatory oversight as seasonal vaccine from the FDA. At this time, several studies are underway to determine the best dose of vaccine, and these studies also will monitor for any adverse effects, although the safety of the vaccine is likely to be similar to seasonal flu vaccine. CDC is encouraging the public and health care providers to report any potential adverse effects of vaccination through the Vaccine Adverse Events Reporting System (VAERS), the main way vaccine safety is monitored in the US currently. In addition, CDC has established additional methods to monitor the safety of this vaccine for unanticipated problems including: a vaccine safety monitoring network in collaboration with large managed care organizations that focuses on rapid detection of potential problems; monitoring of 1.5 million US military personnel in collaboration with the FDA and the Department of Defense; and active surveillance for Guillan-Barre syndrome in 10 states.

*Sign up for email alerts from Public Health - Seattle & King County about H1N1 Influenza

http://www.kingcounty.gov/healthservices/health/preparedn ess/pandemicflu/swineflu.aspx

H1N1 Vaccine Provider Pre-Registration Begins New

Washington State Department of Health and Public Health - Seattle & King County have started the preregistration process for licensed healthcare providers in King County who are interested in providing H1N1 vaccine to eligible patients and clients. Preregistration is the first step in becoming an approved provider for administering the H1N1 vaccine.

Please note: currently enrolled Vaccines for Children (VFC) Program providers are already pre-registered.

Pre-registration to be an H1N1 vaccine provider is available at: www.doh.wa.gov/swineflu/h1n1reg.htm.

For questions related to pre-registration please contact Public Health- Seattle & King County at 206-296-4774 or email vaccineinfo@kingcounty.gov.

Public Health Works with Schools to Prepare for H1N1 and Seasonal Flu New

This week Public Health launched a series of weekly teleconferences with schools, aimed at helping public and private schools get prepared for H1N1 and seasonal flu. This effort has been coordinated to ensure schools have the latest information available regarding local, state and federal recommendations for preventing the spread of influenza in schools and appropriate strategies for dealing with flu in their schools if many students or staff are sick. In addition. Public Health will be coordinating with schools and state and federal partners to monitor school absenteeism and school closure activities.

The following websites are available to help guide schools on preparing and responding to H1N1 and seasonal influenza this year:

- Public Health H1N1 web page http://www.kingcounty.gov/health/H1N1
- CDC guidance for schools http://www.cdc.gov/h1n1flu/schools/schoolguidan ce.htm
- Local information and instructions for reporting school absenteeism http://www.kingcounty.gov/healthservices/health/ preparedness/pandemicflu/swineflu/public.aspx

Washington State Department of Health

Public Health – Seattle & King County gov/healthservices/health/preparedness/pandemicflu/swineflu

upcoming

August 31, 2009, 9am -12pm Seattle Children's Hospital Auditorium 4800 Sand Point Way NE, Seattle, WA 98105

Workshop New

Public Health - Seattle & King County and the King County Healthcare Coalition are hosting an H1N1 vaccine workshop for healthcare providers. The goal of the workshop is to get input from healthcare on the regional H1N1 vaccination plan, including strategies to address vulnerable populations and identified priority groups.

Who should attend? Healthcare executives and clinical leaders. infection control personnel, emergency managers, employee health, and public information officers

September 14, 2009 8am-12pm

Bell Harbor Conference Center

RSVP by September 8

questions?

Please email